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DR. CHANDLER'S ADDRESS BEFORE THE VERMONT MED. SOCIETY.

[Concluded from page 34.]

BUT the question returns with renewed urgency, by what methods can these desirable ends be effected? The world abounds with projects for reformation; in morals, in religion, in civil government, in all the departments of practical life, in all the opinions and usages that appertain to men in their social state; and in the noise and strife which ensue, it is often a problem, whether the evil to be reformed, or the mischief of the remedy, is most to be deprecated. Somebody has pithily said, "save me from my friends, and I will take care of my enemies." So, too, the amount of injury inflicted on a good cause, by the folly of those who would promote it, often exceeds the benefit gained. From the fact that reformers themselves are too often typical of *Satan rebuking sin*, reform has become almost a convertible term with radicalism, anarchy, and licentiousness. Moral reform societies may have been instituted by the best of people, and with the purest motives. Their utility is at least apocryphal. We have reformed systems of medicine, which I fear have yet failed to benefit the world, and which may never supersede the works of Hippocrates or Sydenham. Societies for medical reform, in the current sense of the term, would scarcely fail of encountering hostility and contempt.

A protective system, by legal enactment, has once been in force, in this, as in other States, for the regulation of medicine; but its premature abandonment has made the experiment, with us, unsatisfactory and inconclusive. Although medical men are not uniformly in its favor, and popular opinion condemns it; when the popular mind is legitimately and well informed, whatever may be the opinions or wishes of the profession, I doubt not the Legislature will enact protective laws; protective not merely in their influence on the profession, but on the safety of the people. In popular governments there is a wakeful jealousy, which never tires, in opposition to every measure which savors of exclusiveness or monopoly. This is well. But where the people understand that their own interest in such enactments far transcends all that can accrue to the profession, surely their aversion to protective measures should cease. Indeed, it is much to be doubted whether this protection would have been withdrawn, had the profession, in the aggregate, done all that was reasonable to deserve it.

In a government like ours, highly stringent laws for the regulation of medicine would not only be opposed to the spirit of our institutions, but, in their re-action on the popular mind, would defeat their own end. In more arbitrary forms of government, they might be tolerated. In a neighboring province the influence of such laws is apparently salutary. Physicians are there obviously increasing in intelligence; fooleries and enormities in practice are seldom perpetrated; the benefits of legitimate medicine are better appreciated by the people, and professional men are better rewarded. But even there, there is danger of mischievous re-action. The subordination of the people of Canada is hardly commensurate with the high tone of their laws for the regulation of medicine.

What might be the influence of judicious legal enactments for the improvement of medical practice in Vermont, is a question, rather of prospective than present interest. The law-making functions of the State are hopelessly pre-occupied, and overworked with banks and rail-roads and kindred schemes. Should the time arrive, when efficient laws for the encouragement of medicine are attainable, it will be through preliminary culture of the popular mind, by the agency of medical men:—and this result, not unlikely, might itself supersede their necessity.

But medical men are themselves the appropriate subjects of culture, in its broadest sense; culture that shall not only expand the intellect, but enlarge the heart, and elevate the man. And will it be derogatory to the honor of this Society if it distinctly recognize such a purpose as the great end of its organization; a purpose to be accomplished, however, by advisory rather than penal measures; to be comprised in example rather than dictation.

It is a matter for general congratulation that a national organization has been consummated; or, rather, is begun, which promises much; but its influence on the whole community must, of necessity, be tardy, and can hardly be expected, at present, to meet the wants of an isolated State. May not this enterprise itself depend for ultimate success, on the result of organizations like our own? I should deem it, therefore, a most dishonorable desertion of our trust, to abandon the enterprise so solemnly committed to our hands by our predecessors, the pioneers of the profession, the very fathers of medicine in Vermont.

There is one topic, inseparably connected with our subject, which I approach with hesitation; for it involves much that might prove offensive to many with whom we are professionally connected, and to whom we are indebted for great improvement in the present condition and character of the profession in Vermont; and yet I should prove recreant to its honor, if I refrained from urging on your attention, considerations of vital consequence to the ultimate attainment and maintenance of its just relative position. Is medicine, in truth, one of the liberal professions? May it justly claim co-ordinate rank with those which have little relation to handicraft or art; but which mainly involve moral and intellectual culture, and which look through and beyond all mere physical problems? That it involves questions of natural science; that it demands the expertness of handicraft and the skill of art, is too obvious to need comment. But can natural science be comprehended,

or the occasions for professional handicraft and art be truly investigated and understood; or can the science of medicine ultimately accomplish that which is yet expected and demanded, except through the labors of men of the soundest intellect and highest culture? I grant there are men of some learning, yet the mere depositories of other men's thoughts, who have distinguished themselves by brilliant, though visionary hypothesis. But the men who have discovered, and given to the profession, the cardinal truths which constitute the foundation of medicine, were not merely distinguished by originality and strength of mental constitution, but were trained students in general science and liberal learning. Harvey, the illustrious discoverer of the circulation of the blood, gave as much to the profession, as Columbus gave to the world by his discovery of another continent. And this discovery was the result of sound inductive reasoning; an act unattainable, except by thorough scholastic training. Charles Bell has not merely immortalized his name, but has given us a fact in relation to the structure of the nervous system, which in its importance to pathology, and to the successful treatment of a large class of diseases, may yet rival the discovery of Harvey. Charles Bell was fitted for, and directed to this discovery, by great preliminary attainments in science, and thorough training in all sound learning.

You will perceive at once the bearing of such considerations, on the question of preliminary requisites in the pupils of medicine, on their reception as medical students. The gist of the whole matter is comprised in a single sentence, contained in the views recently presented to the profession by the Medical Faculty of Harvard University. Say these gentlemen, "The usefulness of a medical school depends, not so much on the length of its session, as upon the amount of education, preliminary and ultimate, which it requires; the fidelity with which it exacts its own professed requisitions, and the train of healthy exertion, active inquiry, and rigid, methodical, self-regulating study, to which it introduces its pupils." I am not aware that the medical schools of Vermont will suffer by comparison with others; yet truth demands the admission that no inconsiderable portion of the graduates, annually furnished to the profession by our medical colleges, are very indifferent specimens of the culture we have been advocating. If the ranks of our profession were thin, this evil might be borne, like indifferent bread in the absence of other nutriment. But while they are full, to redundancy, I see nothing but evil to the community, and dishonor to the profession, in such policy. The profession of medicine, however, is not too full for the admission of cultivated men; and it is the province of this Society to welcome such to its ranks, and to co-operate with kindred associations in elevating the standard of medical education. We owe to the medical schools the admission, that while they are not irresponsible for the character of their own accredited graduates, there is a primary duty belonging to the profession itself, the performance of which is indispensable to facilitate, perhaps to render practicable, a sound policy on the part of the schools. A professor in one of our own colleges, in reply to animadversions of this character, remarked, "that until the profession itself would discountenance the reception of unlettered candidates to the privilege of private

medical instruction, it would be impossible for the schools to prevent the admission of many such to their own privileges." Though I doubt its power to exonerate the schools, the profession itself deserves the rebuke.

There is some truth, and much consolation, in the doctrine, that titles of honor are of little worth. The time was, when the doctorate, in all the liberal professions, was held in reserve, as the meed of high attainments and efficient service. Now, the novice in medicine seizes at once on the badge, and sports it as jauntily as he wears his cane. In the other professions, though there has been an obvious departure from the continence of earlier times, yet doctors of divinity and doctors of laws are not often blots on their professions. The veteran clergyman, trained in classic and sacred lore, and worn with service, yet waits with patience, or acquiesces with cheerfulness, in the delay of his doctorate; which may never come. And yet the tyro in his flock, who never expended, in his life, the tithe of vigorous thought which his pastor employs on his weekly sermons—this unfledged tyro is a doctor of medicine! Are these things just to others—or creditable to ourselves? But I am exceeding the limits I had prescribed, and I gladly advert to another and more inviting theme.

The proposal to distinguish our annual meetings with a public dinner should be regarded as ominous of good; thus favoring the development of the social and moral elements indispensable to the formation of elevated professional character. And where should the medical practitioner, who is weary with toil, or disheartened with adversity, find appropriate refreshment and encouragement, if not in fellowship and festive participation with minds of kindred pursuits, and kindred experience in the cares and duties, and, it may be, in the discomfitures, of life? The veteran in medicine, who has slowly and honorably won his way to character and confidence, should be here, to encourage the timid and wavering novice, who already begins to distrust his own ability to find his way either to confidence or usefulness. The honest and intelligent, though unsuccessful candidate for patronage, should be here, to gain comfort in the array of "good men and true" he will meet, in like circumstances with himself. In his encounter with men of his own profession, he may acquire the tact, which is all he needs, to gain what he already deserves. Let the victim of indolence, prematurely incrustated with the rust of his own unused and forgotten acquirements, be here, and by wholesome attrition with others, fit himself to repair the waste of earlier years. Let the medical misanthrope be here; the man who has been made such in unsuccessful contest with popular ignorance and delusion; who, though intelligent, and fair, and competent himself, has been forced to succumb to palpable ignorance, or skilful fraud. Let him be comforted. We can solace his misanthropy with like experiences, and answer him with "sigh for sigh, or groan for groan." The mere trafficker in medicine, no matter how intelligent, who knows no higher purpose of skill than the accumulation of fees; no higher end of professional reputation than the attainment of wealth, should be here. Though an *error loci*, let him come. His presence may increase our reverence for all that is just, and true, and lovely, and of good report, in profes-

sional character; though he himself may shrink from contact with liberal minds, and find himself marked, as unworthy the liberal profession he invades.

THE LATE DR. ALLEN, OF VERMONT.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—In an article published in your Journal, Vol. XLIII., pp. 489-90, I am pained to observe an unnecessary charge against one whose reputation is near and dear to me—the more so that he is himself among those of whom it has been well said—*De mortuis nil, nisi bonum*.

The assertion of a grave error in diagnosis, with the broad intimation that this was due to a “superficial examination,” is a serious charge to bring against the living—much more so against the dead. Among those who were best acquainted with Dr. A., a charge of this kind, supported by the questionable observations of non-professional friends, will be received with ill grace coming from one evidently anxious only to show how much more skilful, in diagnosis, the practitioner of three or four years is, than he of thirty or forty years’ standing. This can be fairly deemed the scope of the article in question; for the author actually forgets to inform us whether the patient lived or died, subsequent to the operation.

May I suggest that when Dr. C. reports another instance of his remarkable skill in diagnosis, he display towards the dead, who cannot reply, a similar sense of propriety that he does to the “neighboring practitioner,” and to the “distinguished surgeon of a neighboring county,” who it appears are also chargeable with *less* acumen than himself. J.

Ann Arbor, Mich., Jan. 31, 1851.

FURTHERING OF CICATRIZATION BY A DECOCTION OF OAK BARK.

BY M. GRUSELL.

IN a memoir addressed to the French Academy of Sciences, on the application of galvanism and heat in the treatment of cancer and obstinate ulcers, and which was referred to a commission composed of Messieurs Magendie, Andral and Pelouze, the author, M. Grusell, has an item which we translate for our readers. Knowing the great importance of obtaining the prompt cicatrization of wounds after the excision of cancerous tumors, and having tried numerous therapeutical agents for the purpose, he has observed that the liquids used as vehicles of medicaments, or the aids ordinarily employed, produce bad effects. He has lately tried the decoction of oak bark, applied by means of charpie which has been suspended in it for some days. He allows the charpie thus moistened in the decoction, to dry completely, and then uses it as a dressing in its dry condition. He says that he has, by this means, preserved the simple condition of the wound until it has cicatrized, even when there was a disposition, without this precaution, to an unfavorable termination.—*Philadelphia Lancet*.

REPORT OF CASES UNDER ELECTRICAL TREATMENT.

COMPLAINTS TREATED.	RECOVERED.	AV. No. Sittings.	GREATLY IMPR.	AV. No. Sittings.	IMPROVED. . .	AV. No. Sittings.	NOT IMPROVED.	AV. No. Sittings.	Total Cases.
Asthma	4	52	25	18	5	8	2	2	36
Ague	6	2							6
Bronchitis and Laryngitis	17	16	6	12	4	20	6	35	33
Bleating	11	26	2	11	4	11			17
Cramp	8	13	2	12					10
Cancer							1	30	1
Cough	16	34	5	12	9	9	4	10	34
Constipation	16	31	3	55	1	7	4	11	24
Catarra	7	48	6	25					13
Colic, chronic	3	40							3
Cold Extremities	12	22	3	40			1	6	16
Deafness	7	21	23	24	36	18	26	10	97
Drowsiness	5	8					2	6	7
Dropsy, limbs	4	32	2	15			4	15	10
Dyspepsia, chronic	7	26	25	29	12	9	13	8	57
Debility, general	24	22	116	20	26	11	15	4	211
Diabetes	3	41	2	17	2	11	1	9	8
Determination of Blood to the Head	6	27	31	23	6	14			43
Deformity of the Chest	4	49	4	27					8
Eye, diseases of	22	16	52	20	31	15	29	6	134
Ear, noises	8	22			5	25	6	6	19
Epilepsy	2	27	4	54	3	25	6	7	15
Gout	2	2			3	23	2	3	7
Glandular Enlargement, breast, neck, &c.	23	18	19	16	9	11	15	5	66
Headache, sick, nervous and rheumatic	30	10	42	19	10	10	14	5	96
Heart, palpitation	2	31	12	27	7	9	4	3	25
Humors, rust and sallowness	5	36	20	25	7	26	2	10	34
Hemorrhage	7	19	2	15	1	20	2	11	5
Hysteria	2	42	1	20			1	11	63
Female Sexual Irregularities	32	21	12	29	6	18	13	14	38
Prolapsus Uteri	5	46	12	27	13	15	8	7	72
Joints, diseases of	23	15	29	16	14	16	6	5	44
Liver, inaction, enlargement, and induration	32	23	8	10	4	5			234
Muscles, Cords and Ligaments, diseases of	89	16	76	34	42	16	26	8	388
Neuralgia	199	14	120	16	38	6	31	4	316
Nervous prostration and mental depression	72	21	116	19	70	9	56	5	81
Paralysis, nerves sensation	42	15	16	11	18	5	5	3	92
Paralysis, nerves motion	9	24	33	22	24	15	26	4	10
Spasmodic muscular contractions	7	35	1	30	2	25			11
Falsy, shaking			3	14	4	11	3	8	10
Perspiration, excessive and suppressed	11	26							177
Rheumatism	62	9	51	9	34	8	30	4	6
Tumor on the eye-lids	5	11					1	10	14
Respiration, labored	6	17	8	24					18
St. Vitus's Dance	4	10	10	34	1	20	3	7	23
Stammering	8	20	5	25	4	15	6	5	10
Terrific dreams and nightmare	7	19	2	62			1	10	5
Voice, loss of	2	13	1	25	1	237	1	4	179
Spinal Diseases, Curves, Irregularities & Irritation	52	32	64	38	42	29	21	9	19
Stomach, sinking weakness	5	29	8	20	5	6	1	9	22
Toothache	20	1	1	2			1	2	5
Taste and Smell, loss of	2	35	1	10	1	40	1	15	5
Salivary Glands, abnormal	4	12	1	25					59
Vertigo	36	12	12	19	2	8	9	5	21
Sleeplessness	19	13			2	5			23
Sluggish circulation of the blood	8	16	9	16	4	11	2	30	27
Withered Limbs	3	28	8	3	16	2			8
Weeping Sinews on the wrist	2	10	2	11	1	3	3	7	2
Wens	1	35					1	5	3
Worms	4	12			1	5			5
Scarlet Fever (my own children)	3	5							3
Chilblains	1	5	1	7			1	1	22
Sciatica	4	20	8	14	7	14	3	5	10
Flatulence, bad			4	44	4	20	2	8	
	1044	19	1034	20	570	14	423	7	3071

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The foregoing report—comprising 62 classes and 3071 cases, from Aug., 1844, to Aug., 1850—gives a faithful view of my practice for six years, as taken from my records, and I present it with the hope that it may be useful as a guide to those medical men, who may not have had as much experience in the use of this agent. It will serve to answer the various letters, addressed to me upon the subject of its applicability in many of the cases proposed to me. I should be most willing to give the *modus operandi*, &c., in the foregoing classes of cases, in a series of notes, in your Journal, *if desired*, as I have no secrets to keep from the profession, and shall always be happy to give personally to any one of the regular profession, all the information which may be requested, so far as my experience may enable me to do so.

Very truly your ob't serv't,

19 Temple Place, Boston, Jan. 22, 1851.

JOHN B. CROSS.

EMPHYSEMA.

[Communicated for the Boston Medical and Surgical Journal.]

Two communications, that have recently appeared in the Boston Medical and Surgical Journal, have led me to suppose that a case which occurred in my practice in the summer of the year 1846, may not be without interest to the profession, especially as a course of treatment that was adopted, for a time, promised complete success.

An aged Irishman, who was employed on the line of the railroad then under the process of construction, while in a stooping posture received a blow from a fragment of rock from a blast, upon the lower part of the left scapula, causing a comminuted fracture of that bone, and of the ribs beneath. When I first saw him, an hour after the accident, he was faint and weak, with shortness of breath; yet neither he nor the by-standers would admit that he had received any material injury. After manipulating the part injured, I applied my ear and could distinctly hear the air pass into the cellular tissue, with a sound like the bursting of little bubbles. By pressing firmly over the region of the contusion with my hand, I could prevent the air from escaping through the opening, and give relief to the breathing. I made a compress of the vest of the patient, and binding it tight with a leathern belt, I took the man into my carriage, and carried him two miles to his home. During the ride he complained but little, and after placing him in bed, he said he should not remain there long. Bleeding, cold applications to the seat of the injury, and the usual antiphlogistic measures, were resorted to, and for two days the man appeared to be doing well. On the third day he was told that the *compression* would retard the union of the scapula and ribs, and was induced to remove it, when almost immediately he experienced great difficulty in breathing, and his body began to bloat. After this, I found it impossible to prevent the escape of the air, and shortly the *entire* cellular tissue was distended with it. My friend, Dr. Drew, saw him frequently

with me, for the few days that he survived ; and although we resorted to free and repeated punctures through the skin in various parts of the body, yet in a short time he would appear as though the skin must burst from over-distention, and he died with all the symptoms of suffocation.

I thought then, and still think, that had the compress been allowed to remain, he might possibly have survived his injuries.

Waterbury, Vt., Feb. 12, 1851.

C. H. CLEVELAND, M.D.

OBSTRUCTED MENSTRUATION.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—In answer to the inquiry of Dr. John H. Weir, relative to a case of obstructed menstruation, reported on page 492, Vol. XLIII., of your Journal, I would offer the following, which you may insert or lay aside at your pleasure.

The age, at which the catamenia appear and subside, varies so much with different individuals, that one might be in doubt, whether in this case the secretion had ceased by the limitation of nature, or been obstructed by diseased action, as Mrs. J.'s age is not given. But I will assume the latter to be the case, as it would be treating Dr. Weir unfairly to do otherwise. That diseased action, or some change in the system, which in many cases it would be very difficult to define, produces great changes in the secretions of the female organs of generation, every careful and experienced physician is aware ; and yet the plan of treating such cases would vary somewhat, with different practitioners. I propose to give a short history of a case which occurred in my practice. Mrs. A. was, prior to and after marriage, in perfect health ; but in due time she was delivered, at different times, of three stillborn children. Her confinements were very painful and protracted ; and after the last confinement she had an attack of puerperal fever, attended with great tumefaction of the abdomen, and inflammation of the pelvic viscera ; which continued some fourteen days. She finally recovered, contrary to my expectation ; though her health has not been as good as it was prior to her bearing children. About 12 months after her last confinement, at 36 years of age, the catamenia ceased ; and she was reluctantly made to admit that she was enceinte ; but time passed on, and she experienced none of the other symptoms of pregnancy. Six months had elapsed, when I was consulted, and after careful inquiry, and repeated observation, I prescribed tinct. of iodine, chalybeates, aloes, tinct. cantharides, &c. &c., without any return of the secretion ; with the general health sometimes failing, and at other times recruiting a little, but all the time her health was such as to allow of her attending to her household affairs. After continuing treatment a few months, I advised to suspend further medication, and wait the action and efforts of nature. After waiting two years, I doubted whether there ever would be a return of the secretion ; but within a few months past it has returned as formerly, after an absence of three years. That the menses may commence at a very early age, is certain. I had a patient in whom that secretion commenced

at the age of eight years and seven months, and continued thereafter; and it might as reasonably be supposed that in some rare instance it would cease by the natural decay of the energies of the system at 36 years, as to come at the early age just cited.

But I have diverged from my subject, which was to give an answer to the inquiries propounded by the writer of Mrs. J.'s case.

Query 1st. Did the inflammation of the wound cause sloughing of the inner surface and subsequent adhesion?

Answer.—From the history of the case, as given by the writer, I am of opinion that it did not.

Query 2d. Does the catamenial secretion go on, and is it absorbed by the womb?

Answer.—I think not.

Query 3d. Should an attempt be made to open the ostium?

The answer to this inquiry will be my answer to the subsequent inquiries. I should make no attempt to force an opening into the uterus, and should trust the case to the efforts of nature. At the same time I would keep an eye upon my patient, to guard her from getting too low, before treatment, if she gets into a decline; and if she is living with a husband, I should regard it as more favorable than otherwise, for I think the use of the organs, good and cheerful company, parties of pleasure, rides by carriage, steamboat or railway, horseback exercise, with agreeable dancing parties, &c., might do much towards restoring the secretion, by giving a new impulse to the mind, as well as to the body; for whatever impresses the mind favorably, has a corresponding favorable effect on the general health in every chronic case.

Milton, Vt., Feb. 11th, 1851.

B. FAIRCHILD, M.D.

REPORT OF A CASE OF DOUBTFUL SEX.

BY WM. D. HASKINS, M.D., RICHMOND CITY.

In September, 1850, I examined, by request, a slave belonging to a gentleman in Mecklenburg county, Virginia, who had been reported as "A Curious Case of Hermaphrodism," by Dr. S. H. Harris, in a communication made to the 27th number of the American Journal of Medical Sciences.

In the lower orders of organized bodies *hermaphrodism* is common; indeed, in vegetables it is so prevalent as to have led some to suppose it to be an attribute of the order; and the more nearly the other class of beings approach the vegetable, the more common is this combination of sex. But it is now admitted by nearly all those who have investigated the subject, that no such phenomenon ever existed in the human species as a perfect hermaphrodite, although there are numerous instances of preternatural structure which give the appearance of a double sex. This slave I found to be an instance of this kind; and, as the report of Dr. Harris was calculated to produce a different impression, I have thought it of sufficient importance to justify a re-description.

I must say, in justice to my friend Dr. Harris, that the examination which I was enabled to make was much more satisfactory than the one from which he made the report. His having been made at a time when he did not expect it, he was unprepared with instruments to assist him, and had also to contend with the reluctance which is usually manifested by such persons to have their real situation known. In this instance, nothing but the authority of a master whom he (adopting the masculine pronoun when referring to the case) greatly feared could induce him to submit to an examination.

Anticipating this difficulty, I approached him in a different manner from that resorted to by Dr. H. I met him alone, as it were accidentally, and told him that his situation had been described to me, and I doubted not, from what I had heard of it, that he could be relieved, and if he would confide in me I would promise to observe the strictest secrecy. By this means I succeeded in inspiring him with confidence, and arousing a hope that his difficulty could be removed, whereupon he became communicative, and readily submitted to an examination.

There is nothing very peculiar in his appearance that would arrest attention, until you are told that there is some doubt as to his sex, when it at once occurs to you that his appearance is that of a woman dressed in man's apparel. This conviction is forced upon your mind by observing his stature to be low, frame delicate, hips broad, lower extremities bent or inclined inwards at the knee-joints, making him *knock-kneed*, gait shuffling, instead of the firm, strong, elastic step of manhood, face perfectly smooth, exhibiting no trace of beard, although he is now 21 years old. Opening his bosom, I found the *mammæ*, although not exhibiting the plumpness of virginity, as well developed as you ordinarily see them. Upon exposing the genital organs, however, there is presented a very curious condition of things. The *mons veneris* is prominent and well developed, being covered with hair as in the female, and immediately over the symphysis pubis is situated an organ which resembles almost exactly a dwarfish penis. It is about an inch long, and half an inch in diameter, terminated by a tubercle corresponding in shape and appearance with the *glans penis*. There also appears at first sight to be the orifice of an urethral canal, properly located in the *glans*, but upon closer examination it proves to be the terminus of a fissure situated on the inferior surface of the organ, formed by the approximation of the edges of what appears to be the *nymphæ*, which had adhered to, and were stretched over it, so as partly to contribute to the formation of a preputial covering.

The prepuce, I may say here, also, consisted of that portion of the *labia majora* which was separated by the root of the organ, as well as the lower portion of the *mons veneris*. Drawing back this organ upon the *mons veneris*, I introduced a silver probe along the fissure before alluded to, to the distance of about an inch below its root, where the fissure terminated by the apparent union of its lips, forming a *cicatrix*, which resembled somewhat the *raphe* of a *scrotum*. This *raphe* extended to what should have been the position of the posterior commissure of the *vulva* in the female. Directing my attention again to the

point where the fissure terminated, I endeavored to find, with a probe, the orifice of the urethra, which I supposed existed at or near this place; in this I was not mistaken. I then took a female catheter, and introduced it into the bladder, and there escaped through it about a teacupful of urine. Withdrawing the catheter and inserting it again, at a point a few lines below the orifice of the urethra, I gave it a direction downwards, instead of that of the urethral canal, and found no difficulty in inserting it its whole length into a cavity where its point could be freely moved in any direction. Taking it out, the lower portion was filled with a dark-colored fluid resembling blood, and I doubt not was the menstrual fluid which had there accumulated.

The lower portion of the labia externa presented a rugose, fleshy appearance, and with the raphe or cicatrix dividing them, resembled very much a scrotum deprived of testicles. This condition of the labiæ was doubtless produced by the collection behind them of the fluids escaping from the womb, causing them to act temporarily as the outer walls of a sac containing fluid, the pressure of which varied with the positions of the body. There was evidently a considerable quantity of this fluid in the vagina at this time, as was indicated by the height to which the catheter was filled when withdrawn. I learned from the individual himself that its escape from the vagina was irregular and depended upon the attitude of the body, the only outlet being the small orifice just beneath the urethral opening through which the instrument was introduced. There were, however, regular periodical returns of all those symptoms which accompany menstruation, and so marked were they as to have attracted the attention of the elder female servants in the family. I also learned from him that his penis (as he supposed it to be) was subject to erections, and that he had desires for the female sex, but had been deterred from attempting connection by an apprehension that his deformity would be discovered. As regards the former of these statements, it is not at all inconsistent with our knowledge of the structure of the clitoris; for all anatomists have described it as consisting of erectile tissues like those of the penis, and subject to similar orgasms. The latter, I think, has been satisfactorily accounted for by Dr. Harris, who supposed it to be the results of education: "He having been taught from childhood up to look upon himself as a male, now, in imitation of others, deports himself as such to the other sex."

Thus it appears that this "curious case of hermaphroditism" has been deprived of all its mystery, and proved to be nothing more than a case of occlusion of the vagina, accompanied with hypertrophy of the clitoris.

An operation was proposed; but when I informed him that it would entirely change his assumed sex, and make him a woman, he opposed it with so much earnestness that it was not insisted upon.—*The Stethoscope*.

WATER-MELON SEED AS A DIURETIC.

IN the November number of the Charleston Medical Journal, Dr. Hook, of St. Matthews, S. C., bears strong testimony to the value of the seed

of the water-melon as a diuretic, and gives a very interesting case illustrative of its powers. The editors of the Charleston Journal join their testimony with that of Dr. Hook, and we are able to corroborate their favorable opinion. Dr. Hook recommends that two ounces of the seed be bruised, and a pint of boiling water poured over them. After cooling, one gill of this is taken at a dose, and in this way is not only a demulcent, but an excellent diuretic.

But we can assure Dr. Hook that we have seen much finer diuretic effects from the formula we subjoin, than from any other diuretic we have ever used. It has often succeeded when all others failed. In 1838 we reported in the predecessor of this Journal, a very remarkable case of suffering in the kidneys and bladder, in which the calls to urinate were almost incessant for two days and nights, and only one or two drops of urine could be passed at a time. The pain complained of resembled that described as an attendant upon stone in the bladder. Hip bathing, purgatives, emetics, opiates, and the usual round of diuretics, failed to give any relief. The patient seemed to be sinking rapidly under the combined effects of pain, agitation, vigilance and exhaustion. The antilithic paste was then resorted to for the first time by the writer, and in less than half an hour after it was given the patient was easy, and slept for several hours. The kidneys acted freely, and all suffering ceased. Since that time abundant opportunities have presented themselves for the use of this paste, and its effects are uniformly all that the physician and patient can desire.

The formula for this paste was taught by Prof. John E. Cooke, and he gave strong testimony to its value. The following is the recipe :—
R. Castile soap, \mathfrak{z} iv. ; spermaceti, \mathfrak{z} viij. ; Ven. turpentine, \mathfrak{z} vj. ; ol. aniseed, \mathfrak{z} iij. ; turmeric, \mathfrak{z} ij. ; honey, q. s. Rub the soap and spermaceti well together ; then add the turmeric ; after rubbing them well, add turpentine and ol. aniseed ; and sweeten with honey.

Of this paste, a piece the size of a nutmeg is given two or three times a-day. The diseases in which it is most useful are those in which the mucous membrane is involved. There is a species of hoarseness which follows inflammatory action, and which often approaches aphonia, in which this paste is a very valuable remedy.—*Western Journal of Medicine and Surgery.*

CASE OF ENCEPHALOID DISEASE OF THE KIDNEY.

BY W. NICHOLS, M.D., NEWARK, N. J.

G. D., aged 4½ years, of a rather delicate constitution, large head, pale complexion, blue eyes, lymphatic temperament ; has had no illness worthy of notice, excepting whooping cough, about sixteen months since. During the last spring he was observed, at times, to show marks of slight indisposition, and to droop in spirits and activity ; from which, however, he would rally again—and this alternation of illness and apparent health continued during half the summer ; with, however, a manifest loss

of flesh and strength. In the latter part of July, the parents discovered a swelling of considerable size in the abdomen, and my attention was called to the case. The tumor was found to occupy a large space in the abdomen, extending from a point a little below and to the left of the epigastric region, where it was most prominent, to the right hypochondriac space, which it entirely filled; thence descended to the right iliac region, and again returned to the left side of the epigastrium, with a well-defined edge, slightly concave near its upper part. Little pain in the tumor, even upon firm pressure—no discoloration of the eyes—skin pale—no œdema of the feet—digestive functions but little impaired. These symptoms hardly warranted us in assigning the disease to the liver, although its locality seemed to point to that organ. Prof. Parker, of New York, upon examining the case, pronounced it encephaloid cancer of the kidney, corresponding closely to two cases reported by him in the last number of the *New York Journal of Medicine*, except that, unlike those, this case was not preceded by any eruptive disease. The diagnosis was verified by a gentleman expert in microscopic examination, who discovered encephaloid matter in the urine. From this time, the tumor rapidly increased in size until it filled more than half the abdomen—emaciation became great, with less febrile excitement, and less impaired condition of the digestive functions than might have been expected. Toward the last of his illness, the urine, which had been quite natural, both in appearance and quantity, became scanty, and at times bloody and turbid—paroxysms of pain were felt in the right iliac region, extending to the groin and thigh—nausea and vomiting of bilious matter—great listlessness, although the mental faculties were unimpaired—and a gradual decay of vital power, which ended in death on Sept. 14th.

Autopsy.—Great emaciation of the body—the tumor was found to fill the greater part of the abdomen, and to be a cancerous affection of the right kidney, exhibiting in its structure the marks peculiar to what is termed encephaloid disease. It weighed four and a half pounds—was of an irregular oval appearance; grayish color, except in some, livid spots where suppuration had commenced; was firm to the feel, although containing pus in some parts of its structure. It was firmly adherent to the peritoneum and liver, and some of the intestines by bands of false membrane. The caput coli was found in the left iliac region, and all the intestines were crowded near this space. The left kidney, and all the other abdominal organs, appeared healthy, except that the liver was considerably shrunken in size.

The case is interesting, inasmuch as it shows how imperceptible may be the invasion of disease in this organ; how far it may progress without affecting materially the general health, and how protracted may be its course.—*New Jersey Medical Reporter.*

 THE BOSTON MEDICAL AND SURGICAL JOURNAL.

 BOSTON, FEBRUARY 19, 1851.

EDITORIAL CORRESPONDENCE.

On the River Nile—Monday, Nov. 18.—This is New-England washing day, and has been properly observed on board, by having various articles, thought indispensable to respectable appearance, well washed, though some of the pieces look forty times worse for the operation. Haule! up to the bank last evening, quite early, in a lonely spot, near a millet field—the desert on the other side. An Arab and his wife were sitting by a grass fire, at the side of a hencoop, roasting millet heads in the embers, of which they invited us to partake. Two children were sleeping on the bare ground, unconscious of the excitement caused by the arrival of christian strangers. The nights are here very cold, yet the middle of the day is like the first of August in Boston and its neighborhood. Hassan is again breaking down—threatened evidently with typhus fever. Most of the crew live in the up-country; one is from Nubia; and as they all have families on the way, they are solicitous to move ahead. Their pay, when they succeed in obtaining employment, is only \$3.50 per month, at most. They go down to Cairo, in summer, in pursuit of jobs, and return when their pockets are full of paras. Ten dollars would be a great sum to return with.

Tuesday, Nov. 19th.—Various amusing incidents have occurred since yesterday; such as stopping at a little mud village on the side of one of those tremendously big mounds, made by the tumbling down of old human dwellings on the same spot, for twenty centuries, for aught I know, when three bare-footed old Arabs, one with a long rusty spear, marched solemnly down to the bank and demanded 7 cents, port charges, for being within the town's jurisdiction, they being the night guard for safety while there! The villagers were merry people, smoking, singing and lounging. The females, generally, were decorated with heavy bead and silver bracelets on both arms—some had two on each, with large strings of beads round their necks, and ear-rings that would have satisfied a savage. We passed, to-day, that low range of ragged limestone rocks, lying in sheets of about four feet in thickness, like masonry, called Gabel Jier, where tradition says the birds used to hold an annual congress, on the west side of which, facing the desert, is a convent of Coptish Monks. As the boat approached, two stout fellows, stark naked, came swimming off to it, begging most devoutly for backsheish, and crossing themselves with the right hand, which on both of them was minus the index finger. At 3 o'clock, P. M., we arrived at Minyeh, another great mud town, the residence of a second governor, and the locality of an old city, connected with a thousand events of transcendent historical interest, but which cannot be introduced here. The streets were narrow, as usual in these upstart modern cities of re-juvenated Egypt—often covered over head. Individuals of the same profession are invariably kept together, as all the shoemakers in one bazar, the breadsellers in another; and, with perhaps a few exceptions, at the end of each is a big, rickety, wooden gate, which is closed at night. Police officers, each wearing on his abdominal front a pair of horse pistols, are always sitting at shop windows, coffee-rooms, and smoking quarters.

I saw one tall fellow standing in a by-place, in a dignified, self-complacent position, armed with a wooden sword, roughly manufactured too, for the knife-strokes could be seen two rods off. Close to the river, on the west side, is a sugar manufactory, a favorite establishment of the late Mohamet Ali, now in full operation, having beautiful apparatus, and in all respects as complete as that at East Boston, once politely shown me by Mr. Soule. The sugar, however, is made from the cane, and better specimens of loaf sugar are not to be found in Europe or America. The workmen are principally French, yet there is a large sprinkling of Arabs—not far from 100 in number. Sugar cane is seen flourishing grandly near Gabel Jier, and so on, further up, on the east side of the river. That vile and reviled old despotic Mohamet Ali was an extraordinary man, whose genius and energy were never surpassed in this country, from the Pharaohs to Abbas Pasha. He was a man who would have left the impress of his footsteps in any country in which circumstances might have placed him.

Nov. 20th.—Nothing of interest has transpired since yesterday. The Reis threshed one of the sailors smartly for wandering away on shore after the boat started—and immediately after, very calmly commenced his devotions, having ascertained from me, on a map, the direction of Mecca. Another of the crew fell sick—and having a native hakeem or doctor in their number, he was consulted, and I was permitted to witness his treatment. At first he manipulated the sick man's head, after the manner of the animal magnetizers; then stroked the scalp forward, to make as large a wrinkle as possible on the forehead, which he pinched violently, and then bit it through the folds of a cap. He next jerked the man's head forcibly, from one side to the other, and then rubbed the poor fellow's ears at a fearful rate. The spine was next rubbed with tepid water, and hot water poured into the canals of both ears. Lastly, in a gentle manner, with the tip of a finger dipped in the tepid water, the navel was touched. Ali Mahomed was then permitted to lie down; and at the moment of writing this, he is improving, the mulling or kneading of the body having had a good effect. Opposite the celebrated tombs of Beni Hassen, of which Mr. Gliddon has given so vivid a description, we stopped at a village to make purchases. When the inhabitants discovered that there was a doctor in the company, they besought me to visit a hut where a man was prostrated with disease. This afforded me a rare opportunity of viewing the interior of an Arab dwelling, which under any other circumstances could not have been effected. A more comfortless place could hardly be found. Had I remained all day, I could have busily occupied myself by attending to the calls for advice. Some of the people had singular difficulties, which the art of medicine could not relieve.

Nov. 21st.—This day has not been productive of incidents; the region through which we are passing is monotonous, and destitute of objects of historical interest. The eastern desert comes quite to the water in many places, as dreary as possible in aspect, there not being a sprig of vegetation to relieve the eye. In the course of a morning walk of about two miles, an opportunity was afforded of inspecting the fields of sugar cane, millet, and some small patches of tobacco and beans. Farming, at this particular season, mainly consists in raising water from the Nile in leather buckets or baskets, and in distributing it over the land, in raised mud trenches. It is a laborious service—the men mostly naked. The sense of shame seems unknown to these hard-working fellahs. Boys and girls, ten years of age, are often seen in villages, utterly clothless. I saw fish

caught to-day in a novel manner. A kind of basket was suddenly plunged, inverted, into the muddy stream, close to the bank; the lad then run his arm through a hole in search of prisoners—seldom failing to catch two or three each time. This trivial affair demonstrates how well the Nile is stocked with fish. Their variety as well as abundance is quite astonishing. Several young camels were also seen on shore. Youth adds nothing to the beauty of that ugly-formed animal, so admirably organized, however, for these everlasting deserts now in plain view. To-day the *Dom Palm* is seen growing—its nearest approach to lower Egypt;—it is a native of the hot interior of Africa. Crocodiles come no lower down the river than where these observations are written, viz., opposite the range of Gebel Aboofadee—where square door-ways are perceived, leading to extensive grottoes, which belong to a series of labyrinths in this neighborhood, where *dogs* and *cats* were stored as sacred mummies. By looking at a map of the Nile, you will perceive I am not far from the great town of *Manfaloot*, where the Arabs say Lot was exiled.

Friday, Nov. 22d.—Nothing has been accomplished to-day, for want of wind. The river is exceedingly tortuous, and although the boat has traversed several miles, we have actually moved but little in a right line. In the early part of last evening, passed the town of *Manfaloot*, located on lofty mounds of rubbish, the unmistakable evidences of the site of a great town or city, earlier, possibly, than the birth of Abraham. The never-idle Nile is now washing it away so rapidly that no memorial of it will be found a few years hence. Opposite, on the Arabian side, are the mummy crocodiles. Here, or rather back of the town, is where Mohamet Ali mustered his army for the march to the Morea, at a place called *Beni Adee*, at the very verge of the Libyan desert. Prodigious flocks of wild geese, perfectly white, are seen to-day—but too far off for a shot. They post sentinels, when on an island, discernible with the unassisted eye, and fly in precisely the same order they do in our country. The peasants are here planting melon seeds.

Saturday, Nov. 23d.—At *Osioot*, a city of 20,000 inhabitants, the ancient *Sycopolis*, where wolves were worshipped, a little distance back of the town the entrances to the catacombs of sacred animals are seen, which are to be inspected on our return down the river. The land has made off nearly two miles from the city—across which the traveller rides on a donkey, on the top of a high dyke. At the gate of entrance the police are stationed, and the principal authorities were seated on each side of a bridge, gravely smoking, as we passed along. All the streets very much resemble those of Cairo, and are closed at each end by a wooden door at night. The bazars, or markets, are precisely after the pattern every where met with in Egypt. Grain merchants were sitting by the side of huge piles on the bare ground, smoking for customers, as were all other dealers, from the woman who sells a handful of dates to the farmer of the revenues. Fields were finely watered, and therefore excellently well cultivated, in the vicinity. This is the residence of the governor of Upper Egypt, who has a palace, with ample accommodations for the display of a great officer's appurtenances of state. A poor prisoner, with a heavy iron chain around his neck, and both hands locked into a block of wood, passed us under guard. The donkey-driver gave me to understand that he would be shot. Many of the houses of *Osioot* are of coarse, large burnt brick, which have the appearance of having figured a hundred times, in one edifice after another, within the last 2000 years! They are all flat on the

top, with few or no windows, and, what strikes the stranger as being exceedingly curious, is the fact that the doors generally have a bolt on the outside—a heavy, wooden sliding-piece, which the last of the family who goes out gives a slide—no one ever presuming to enter a portal thus fastened. We saw a flock of wild geese passing over head to-day, that probably extended more than a mile and a half. Here purchases of fresh provisions were made, and away we sailed for Thebes with a promising breeze.

Sunday, Nov. 24th.—Hauled up at a small date-tree village, just after dark, where the noise of a drum, made by stretching a skin over the mouth of an earthen pot, together with the blaze of a grass fire, induced us to take a lantern and examine the premises. After some windings over great heaps of rubbish, indicating the localities of ancient towns and cities, we entered a roofless enclosure, where a middle-aged woman was beating the tom-tom, squatted in the dust and ashes, surrounded by half a dozen young girls, who sang and beat time by clapping their hands—a custom that existed when Herodotus visited Egypt. Occasionally they gave a simultaneous kind of warbling. A few gravely-smoking Arabs sat by the side of a wall, in the dark, looking on, with apparent delight. This was said to be the celebration of a fellah marriage. Not far from here, is a certain wonderful stone, visited by females, from a conviction that it exercises an influence in making them the happy mother of many children. It is curious to observe, that with all the poverty, and moral, religious and political degradation of these people, a numerous offspring is desired above all other blessings. The more one has, the more important is he in society. Our dragoon says a friend of his, at Thebes, has had 45, viz., 25 sons and 20 daughters, by three living wives. We have passed *Gowel el Keber* to-day—the ancient Antæopolis—which is worth reading about in any of the Gazetteers of the old world. Within a few hours we have entered the borders of the Thebiad of the old geographers of Egypt. For the first time, the wind blows severely enough to see, at a little distance from the desert, that sand is fairly flying in the air. Excellent water-melons, muskmelons, string beans, tomatoes, squashes, peppers, &c., are to be had in the bazars. Green Indian corn is in the milk, and sold, roasted, by poor women.

Monday, Nov. 25th.—Passed Akhmeim, the site of one of the oldest cities in the Thebiad; and Chemmis, or *Panopolis*, where stood a famous temple of Pan. While penning this paragraph, there is seen the great town of Girgeh, of christian origin, the location of the oldest Roman convent in Egypt. The Moslem minarets have a pretty appearance, in the distance, overtopping the swaying palms. The bold headland rocks of the Arabian desert, the wall that keeps the Nile in its bed, at this particular place dip fairly into the water, and by the deep furrows worn in them at the base, show how firmly they have withstood encroachments up their arid domain beyond.

Blackman on the Reduction of Strangulated Hernia.—We have received from the author, Dr. Geo. C. Blackman, of Newburgh, N. Y., a pamphlet of 62 pages on the "Reduction of Strangulated Hernia in mass." This interesting and practical essay first appeared in the *American Journal of the Medical Sciences*, in 1846, and has since been entirely re-written, and published in the *New York Journal of Medicine*. It was our impression that strictures in the hernial sac did not occur so often, and

particularly when the hernia is so easily reduced, as in the cases mentioned by Dr. Blackman. It certainly demonstrates the necessity, in cases of obscure strangulation, of being watchful over our patients, until the time of danger is past. In fact, from the details in the treatise of Dr. Blackman, it would seem to be always proper, in doubtful cases of strangulation of the bowels, immediately to have resort to the knife. Forty-six examples are given of the reduction, "*en masse*," of hernial tumors, which followed the application of the taxis, twenty of which were operated upon with the knife afterwards, and eleven of them recovered, notwithstanding the disadvantages they labored under from the delay of the operation. We have read Dr. Blackman's treatise with much pleasure, and hope soon to find room to present a portion of it to our readers.

State Lunatic Hospital.—The 18th annual report of the trustees and superintendent of the State Lunatic Hospital at Worcester, Mass., has been received. We learn from it that there were 429 patients at the commencement of the past year; that 241 patients were admitted, and 229 discharged; that 670 persons thus became inmates during the year, 441 remaining at its close,—making the average for the year of 440 patients. The Hospital is fitted to accommodate 375 patients only, yet the superintendent has been obliged to find room for new comers, and consequently all must have been crowded. The late calamity which occurred at the Insane Hospital in Maine, is properly touched upon by the trustees, and it will no doubt relieve the minds of those who have friends in the Hospital at Worcester, to know that every means for their security from fire, is carefully provided for. Dr. Chandler pays a most feeling tribute of respect to the memory of the late superintendent, Dr. Woodward, and his biography occupies a large part of the report. Dr. Woodward was truly a remarkable man, and the records of the institution over which he so satisfactorily presided for many years, will ever show this. It is gratifying to know that his successor in office partakes of the same good qualities, and is universally liked by the trustees, as well as the patients under his charge.

Dr. J. M. Smith's Address.—The anniversary address before the New York Academy of Medicine, by Dr. Joseph M. Smith, has been received. It is an able and well-written discourse, evincing a highly-cultivated mind, and a noble and generous heart. The "soldier," which forms the topic of the address, receives from the learned doctor a tribute of honor and respect that is justly deserved. We have the elements of true courage and heroism in the soldier faithfully portrayed, both in the conflict with his fellow-man, and that of his greater enemy, death! War is ever to be deprecated; and in our advancement of science, its munitions should be so *destructively improved*, that it would deter the most valorous men from engaging in it.

Dr. Lambert's Anatomical Plates.—Dr. T. S. Lambert proposes to publish a series of Anatomical and Physiological drawings, after the style of Bougery and Jacobs, nineteen of which are to be exact copies. The first three are now ready, and are really correct and *life-like*. If there be any difference between them and Bougery's, it is that those of Dr. Lambert are more highly finished and colored. What astonishes us most, is the very low prices at which they are to be supplied. It will hardly be believed that *twenty-five* of them are to be sold at the extremely low price

of six dollars. Upon such reasonable terms, it is hoped that all the teachers of our schools, where anatomy and physiology are taught, will procure copies. Dr. Lambert is an enemy to quackery in *all* its forms, and takes this method of giving the people an opportunity of becoming a *little* acquainted with their organization, that they may understand in whose hands such a beautiful and intricate structure should be placed when diseased. Dr. Lambert has our thanks for the superb copies sent us; and when the rest of the series are received, it will afford us much pleasure in speaking more particularly of them, and in the terms which they may merit.

The Diary of a Tobacco Smoker and Chewer.—We have received a little pamphlet, published by Damrell & Moore, of this city, which is said to be the *veritable* diary of the Rev. Solomon Spittle. The dedication is from the pen of Dr. Ziba Sproule, who states that he made the post-mortem of Spittle, and thinks there is no doubt that his death was "*Phthisis*, caused by the inordinate use of tobacco." Spittle leaving a widow with three children, in destitute circumstances, the benevolence of Dr. Sproule is excited in their behalf, and consequently he has her late husband's diary published, and he earnestly wishes every one to contribute to her relief, by the purchase of a copy. It is rather humorous, and doubtless contains some truth as well as humor. The peculiar feature about it, is, that every one will take much pleasure in reading it, and many perhaps may be convinced that if the practice of chewing tobacco is not hurtful, it is really a very *nasty* habit.

Medical Miscellany.—Dr. James N. Austin, late of Virginia, has been appointed Professor of Materia Medica and Therapeutics in the medical department of Georgetown College.—A child died in Baltimore, on Friday morning, from the effects of laudanum, furnished by an apothecary, instead of paregoric.—A petition has been forwarded to Congress, signed by a large number of Americans in Havana, praying the establishment of a hospital for American seamen in Havana.

ERRATA.—On page 18, in Dr. Jewett's case, the name "Warner" should have been spelt *Wormer*; and on page 19, line 6th, "possibility" should read *probability*.

SUFFOLK DISTRICT MEDICAL SOCIETY.—The monthly meeting for medical improvement of this Society takes place on Saturday evening next, Feb. 22d, at 7 o'clock, at their rooms, Masonic Temple.

MARRIED.—At Fairhaven, Dr. William Bass, of Middlebury, Vt., to Miss Elizabeth, daughter of the late Thomas Atwood, Esq., of Plymouth, Mass.—At South Berwick, Me., on the 13th inst., Ezra Bartlett, M.D., to Mrs. Eleanor A. Hubbard, of S. B.—At Floral College, Robeson Co., N. C., Dr. Hector McNeill, of Clio, S. C., to Elizabeth H., daughter of the late Samuel Jewett.

DIED.—In this city, of consumption, John Spence, Jr., M.D., aged 33 years.—In Bradford, Vt., Dr. Lockhart Wright, aged 79 years and 3 months.

Deaths in Boston—for the week ending Saturday noon, Feb. 15, 84.—Males, 38—females, 46. Accidental, 1—apoplexy, 1—disease of the bowels, 2—consumption, 14—convulsions, 6—croup, 1—debility, 1—dysentery, 3—dropsy, 2—dropsy of the brain, 2—erysipelas, 2—fever, 1—typhus fever, 1—scarlet fever, 2—lung fever, 6—brain fever, 1—hooping cough, 2—disease of the heart, 2—infantile, 4—inflammation of the lungs, 1—marasmus, 2—measles, 7—old age, 2—palsy, 1—puerperal, 5—purpura, 1—smallpox, 2—disease of spine, 1—teething, 2—tumor, 1—unknown, 2.

Under 5 years, 41—between 5 and 20 years, 9—between 20 and 40 years, 18—between 40 and 60 years, 8—over 60 years, 8. Americans, 40; foreigners and children of foreigners, 44.

Medical Men in California and Australia.—Dr. Sealy concludes a letter as follows, in the London Lancet, respecting the profession in these two countries :—"Such is the true state of California. For God's sake, Mr. Editor, dissuade every one from coming here, for it is a hell upon earth; and if money is to be made here occasionally, it is hardly earned, by the sacrifice of health, comfort and quiet. It is, however, better than the colonies; there is no money there; nothing but a fine climate, and plenty to eat and drink. Let no medical man who can get bread and cheese at home go to Sydney, Port Phillip or Adelaide, or he will most likely have to turn bullock-driver, as more than half do, and get lost for ever. Too many, alas! are deluded, to their temporal and eternal ruin, by being induced to go out as surgeons to emigrant ships. The scenes I have witnessed of well-educated, respectable young men, in rags, were fearful to behold."

Collodion applied to Burns.—Dr. Liman, of Berlin, states that he has found collodion a most excellent application to burns. He has applied it in many cases with the best results. He states that it allays the smarting, forms a protective covering, which excludes the action of the air, and is so exactly adapted to all parts that no other dressing is required. The first application is attended with some pain, but is soon followed by alleviation of the suffering, and the cure proceeds steadily without pain. Dr. Liman applied the collodion with a camel-hair pencil, covering the entire surface, and daily re-applying it to the fissures and uncovered parts. Dr. Liman relates one case in which it was applied in an extensive burn with immediate advantage, and ultimately a speedy cure, without remaining contractions of the integuments.—*Casper's Wochenschrift*.

M. Royer-Collard.—Died lately, at Paris, in his 47th year, Dr. Hippolyte Royer-Collard, Professor of Hygiene in the Faculty of Paris. The name of the deceased has been long known to men of science in Europe. The French journals are filled with maudlin sentimental orations delivered over his grave, but they give no biographical account of him or his labors. He was born to comparative wealth, and the great stimulus to exertion—necessity, which has carried forward others to the highest rank in the profession, did not exist in his case. M. Royer-Collard has filled the professorship of Hygiene in the Faculty, and has died in the prime of life, regretted by his colleagues and pupils.—*London Med. Gazette*.

Velocity of the Galvanic Current in the Electric Telegraph.—It was stated by the Earl of Rosse, at the recent meeting of the Royal Society, that some experiments had been recently made in France to determine the velocity of the galvanic current in the electric telegraph, and the result was that this velocity had been greatly overrated. It has been found not to exceed a rate of from 11,000 to 28,000 miles in a second of time.—*Ibid*.

The registration of the medical students attending the metropolitan schools, has been concluded at Apothecaries' Hall, London. 1116 students have been registered for the medical session 1850-51, the largest number since the session 1842-43. Of these, 371 are new students.